Image# 201511059003287570 PAGE 1 / 12

**FEC** FORM 3Y

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

TONIN 3X	For Other Than An A	Authorized Committe	ee		Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typir over the lines.	ng, type	12FE4M5		
American Medical Res	sponse Inc Political	Action Committee	<b>)</b>	1 1 1 1 1		I
ADDRESS (number and street)	6200 S Syracuse Way,	Suite 200				
Check if different						
than previously reported. (ACC)	Greenwood Village			CO	80111	
2. FEC IDENTIFICATION N	UMBER ▼	CITY A	S	STATE A	ZIP CO	DE 🛦
C C00389585	3		IEW N) <b>OR</b>	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8) ×	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:			lun 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (0	Q1)		lul 20 (M7)		20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (0	BPE Floation	Primary (12P e: Convention (		General (		Runoff (12R)
October 15 Quarterly Report (0		S. Gonvention (	D D /	y y y y y		
January 31 Year-End Report (	YE) Ele	ection on			in the State o	f
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election Report for the	,	i)	Runoff (3	0R)	Special (30S)
Termination Report (TER)	t	ection on	D = D /	Y	in the State o	f
5. Covering Period 1		15 through	10	/ 31 /	2015	
I certify that I have examined the	his Report and to the bes	t of my knowledge and b	elief it is true	e, correct and	l complete.	
Type or Print Name of Treasure	er Mr John Ranieri					
Signature of Treasurer Mr J	Iohn Ranieri	[Electronically	Filed] Da	ate 11	/ 05 /	2015
NOTE: Submission of false, error	neous, or incomplete inform	ation may subject the pers	son signing thi	s Report to th	e penalties of 2 l	J.S.C. §437g.
Office Use					FEC FOR Rev. 12/2	
Only	1					

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Medical Response Inc Political Action Committee 2015 10 2015 Report Covering the Period: 10 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 76142.42 January 1, 2015 (b) Cash on Hand at 67060.52 Beginning of Reporting Period..... 12015.08 1560.73 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 68621.25 88157.50 6(a) and 6(c) for Column B)..... 2500.00 22036.25 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 66121.25 66121.25 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### American Medical Response Inc Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees				
(i) Itemized (use Schedule A)	1519.18	8830.45		
(ii) Unitemized	41.55	3184.63		
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	1560.73	12015.08		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	1-00-0	40045.00		
Totals to Line 33, page 5)	1560.73	12015.08		
Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
_	0.00			
All Loans Received	0.00	0.00		
Loan Repayments Received	0.00	0.00		
Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts	7			
(Dividends, Interest, etc.)	0.00	0.00		
Transfers from Non-Federal and Levin Funds	0.00	0.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(Hoth Schedule 113)	7	0.00		
	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	1560.73	12015.08		
Total Federal Receipts				

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caronian Tour to Buto
	(i) Federal Share	0.00	0.00
	()	, , , , , , , , , , , , , , , , , , , ,	
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party	7	
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	2500.00	22000.00
	Independent Expenditures		
	(use Schedule E)	0.00	0.00
	Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
	(use Schedule F)	0.00	0.00
	Loan Panaymenta Mada	0.00	0.00
	Loan Repayments Made	7 7	3.00
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	7
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	0.00	36.25
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) I ederal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add		<del> </del>
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,	2500.00	00000
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2500.00	22036.25
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	2500.00	22036.25

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1560.73	12015.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1560.73	12015.08
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER: **PAGE** 6 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Medical Response Inc Political Action Committee Full Name (Last, First, Middle Initial) Christopher Verkest Date of Receipt Mailing Address 16574 SW Sidney Lane 2015 10 31 City Zip Code State Transaction ID: PR1364395439309 OR Sherwood 97140-7920 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Supervisor Ops (Portland) American Medical Response Northwest, I Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 220.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Ronald F. Dire-Day Date of Receipt Mailing Address 8004 Kenton Lane S.E. 10 31 2015 City State Zip Code Transaction ID: PR1364405039309 WA 98501-6884 Olympia Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Name of Employer Occupation American Medical Response Ambulance Se Dispatcher II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) 423.06 Other (specify) Full Name (Last, First, Middle Initial) c. Steve E. Scruggs Date of Receipt Mailing Address P.O. Box 434 10 31 2015 City Zip Code State Transaction ID: PR1364405239309 OR Murphy 97533-0434 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Paramedic Lead American Medical Response Northwest, I Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 220.00 Other (specify) 117.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	R LINE	NU	IMBER	:	PAGE	7	OF	12
Use separate schedule(s)	(che	ck only	or or	ne)					
for each category of the Detailed Summary Page		11a		11b		11c	12		
,		13		14		15	16		$\Box_{1}$

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) Valerie A. Gaither		Date of Bessial
Mailing Address 83 Muirfield Dr.	Date of Receipt  10 31 2015	
City	Transaction ID : PR1364852339309	
Bluffton	SC 29909-4627	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	_
Physician's & Surgeon's Ambulance Serv	VP Procurement	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  220.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Alfred Dellavalle		Date of Receipt
Mailing Address 43 Oakwood Drive		10 31 2015
City	State Zip Code	Transaction ID : PR1364986339309
North Haven	CT 06473-1938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
American Medical Response of Connectic	VP Government Relations	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	880.00	P/R Deduction (\$20.00 Weekly)
Full Name (Last, First, Middle Initial)  John Eagle		Date of Receipt
Mailing Address 267 Jennings Way		10 31 2015
City Mickleton	State Zip Code NJ 08056-1029	Transaction ID : PR1365042539309
	140 00030-1029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer	Occupation	
American Medical Response Mid-Atlantic	Account Executive Senior	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	P/R Deduction (\$19.23 Bi-Weekly)

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

12

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Medical Response Inc Political Action Committee Full Name (Last, First, Middle Initial) Steven J. Delahousey Date of Receipt Mailing Address 2580 Rue Palafox 2015 10 31 City Zip Code State Transaction ID: PR1365131539309 MS Biloxi 39531-3733 Amount of Each Receipt this Period FEC ID number of contributing 115.38 federal political committee. Name of Employer Occupation VP Emergency Preparedness Mobile Medic Ambulance Service. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 846.12 Other (specify) Full Name (Last, First, Middle Initial) B. Debora Gault Date of Receipt Mailing Address 5502 Northwest Highway 10 31 2015 City State Zip Code Transaction ID: PR1365144239309 Waterford WI 53185-2829 Amount of Each Receipt this Period FEC ID number of contributing 115.38 federal political committee. Name of Employer Occupation **EMS MGMT LLC** VP Reimbursement (Federal) Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 846.12 Other (specify) Full Name (Last, First, Middle Initial) c. Ronald W. Thackery Date of Receipt Mailing Address 9922 S. Silver Maple Rd. 10 31 2015 Zip Code State Transaction ID: PR1365144639309 CO Highlands Ranch 80129-5460 Amount of Each Receipt this Period FEC ID number of contributing 115.38 С federal political committee. Name of Employer Occupation **SVP Professional Services** American Medical Response, Inc Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 846.12 Other (specify) 346.14 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

F	OR	LINE	NU	MBER	:	PAGE	9	OF	12
(c	he	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16		17

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NAME OF COMMITTEE (In Full)

American Medical Response Inc Political Action Committee

Full Name (Last, First, Middle Initial)

Steven G. Murphy

Date of Receipt

/			
۷.	Full Name (Last, First, Middle Initial) Steven G. Murphy Mailing Address 4300 Bayview Drive		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City	State Zip Code	Transaction ID : PR1365147939309
	Fort Lauderdale	FL 33308-5327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	288.45
	Name of Employer	Occupation	
	EMS MGMT LLC	SVP Government and National Services	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2115.30	P/R Deduction (\$96.15 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) Randall L. Strozyk		Date of Receipt
	Mailing Address 9209 181st Ave E	7, 0, 4	10 31 2015
	City Bonney Lake	State Zip Code WA 98391-7187	Transaction ID : PR1365275539309
	FEC ID number of contributing federal political committee.	C 90391-7107	Amount of Each Receipt this Period 173.07
	Name of Employer American Medical Response Ambulance Se Receipt For: Primary General	Occupation SVP Operations Aggregate Year-to-Date ▼	P/R Deduction (\$57.69 Bi-Weekly)
	Other (specify) ▼	1269.18	TAX Decadolori (\$67.55 B) Weekly)
).	Full Name (Last, First, Middle Initial) Scott S. Bourn		Date of Receipt
	Mailing Address 10617 Stone Creek Ct.		10 31 2015
	City Parker	State Zip Code CO 80134-2536	Transaction ID : PR1365585339309
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  115.38
	Name of Employer	Occupation	
	American Medical Response, Inc	VP Clinical Serv and Quality Imprvmt	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)
	Other (specify) ▼	846.12	
S	UBTOTAL of Receipts This Page (optional)		576.90
т	OTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 10 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Medical Response Inc Political Action Committee Full Name (Last, First, Middle Initial) Edward B Van Horne Date of Receipt Mailing Address 108 John McCain Road 2015 10 31 City Zip Code State Transaction ID: PR1365962839309 TX Colleyville 76034-6820 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Name of Employer Occupation CEO and President - AMR American Medical Response Ambulance Se Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 846.12 Other (specify) Full Name (Last, First, Middle Initial) B. Tamara L. Billings Date of Receipt Mailing Address PO Box 750091 10 31 2015 City State Zip Code Transaction ID: PR1542687539309 KS Topeka 66675-0091 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Name of Employer Occupation Medevac Medical Response, Inc. Project Manager Senior Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) 423.06 Other (specify) Full Name (Last, First, Middle Initial) **c.** George White Date of Receipt Mailing Address 10499 Cheetah Winds 10 31 2015 City Zip Code State Transaction ID: PR2209934039309 CO Littleton 80124-9542 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **EMS MGMT LLC Director Business Integration** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 220.00 Other (specify) 164.61 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 11 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Medical Response Inc Political Action Committee Full Name (Last, First, Middle Initial) George Matthew McCormick Date of Receipt Mailing Address 326 Demun 2015 10 31 City Zip Code State Transaction ID: PR2243823839309 MO Clayton 63105-2208 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Access2Care, LLC VP Commercial Managed Transportation Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas R. Wagner Date of Receipt Mailing Address 303 Peppertree Rd. 10 31 2015 City State Zip Code Transaction ID: PR2388846839309 Walnut Creek CA 94598-2701 Amount of Each Receipt this Period FEC ID number of contributing 115.38 federal political committee. Name of Employer Occupation American Medical Response West CEO - AMR Regional Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 846.12 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 145.38 SUBTOTAL of Receipts This Page (optional)..... 1519.18 TOTAL This Period (last page this line number only).....

for each category of the Detailed Summary Page    21b	SCHEDULE B (FEC Form 3X)	Han announts of the Co	FOR LINE	NUMBER:	PAGE 12 OF 12		
Detailed Summary Page 27 28 28 28 28 28 28 28 28 28 28 28 28 28	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon oriny	,			
Amy information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  AMME OF COMMITTEE (in Full)  AMME OF COMMITTEE (in Full)  American Medical Response Inc Political Action Committee  Full Name (Last, First, Middle Initial)  Apallone For Congress  Malling Address PO Box 3176  City  Long Branch  Purpose of Disbursement  Candidate Name  Rep. Frank Pallone Jr.  Office Sought:  State: NJ District: 06  Full Name (Last, First, Middle Initial)  Malling Address  City  State: Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  Office Sought:  Banate  Primary  General  Other (specify)   Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Candidate Name  Candidate Name  Candidate Name  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perio  Category'  Type  Office Sought:  Sought Primary  Category'  Type  Office Sought Primary							
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Pall)  American Medical Response Inc Political Action Committee  Full Name (Last, First, Middle Initial)  Pallone For Congress  Mailing Address PO Box 3176  City State Zip Code NJ 07740  Purpose of Disbursement  Candidate Name  Rep. Frank Pallone Jr.  Office Sought: President Primary General Primar	Any information copied from such Reports and Statem	nents may not be sold or us	sed by any perso	on for the purpose	of soliciting contributions		
Amount of Each Disbursement  Candidate Name  Category/ State: NJ District: 06  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Perio  City State: NJ District: 06  Category/ Type  Category/ Type  City State: NJ District: 06  Category/ Type  City State: NJ District: 06  Category/ Type  City State: NJ District: 06  Category/ Type  Category/ Typ	or for commercial purposes, other than using the name	e and address of any politic	cal committee to	solicit contribution	ns from such committee.		
Full Name (Last, First, Middle Initial)  A Pallone For Congress  Mailing Address PO Box 3176  City	' '		•				
Mailing Address  Mailing Address  Mailing Address  Mailing Address  City  State  NJ  O7740  Purpose of Disbursement  Cardidate Name  Rep. Frank Pallone Jr.  Office Sought:  House  Senate  President  State  Disbursement For:  Senate  President  State  Disbursement For:  Senate  President  State:  Disbursement  Category'  Type  Other (specify) ▼  Amount of Each Disbursement this Perior  Category  Type  Other (specify) ▼  Amount of Each Disbursement this Perior  Category  Type  Other (specify) ▼  Amount of Each Disbursement this Perior  Category  Type  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Office Sought:  House  President  Candidate Name  Category  Other (specify) ▼  Date of Disbursement  Category  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Perior  Category  Type  Office Sought:  Full Name  Category  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Office Sought:  Full Name  Category  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Office Sought:  Full Name  Category  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Office Sought:  Full Name  Category  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Office Sought:  Full Name  Category  Type  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Other (specify) ▼  Date of Disbursement this Perior  Category  Type  Disbursement this Perior  Category  T	American Medical Response Inc Po	olitical Action Comr	nittee				
Mailing Address PO Box 3176  City  Category  City  City  City  City  City  City  City  City  City  Ci	- ,						
Mailing Address PO Box 3176  City State Zip Code NJ 07740  Condidate Name Rep. Frank Pallone Jr.	A. Pallone For Congress						
Long Branch Purpose of Disbursement  Rep. Frank Pallone Jr. Office Sought: House Sonate President State: NJ District: 06  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Cartegory/ Type  Office Sought: House President Senate President Senate President Category/ Type  Office Sought: House Senate President Senate President Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: President Senate President State: District: Pull Name (Last, First, Middle Initial)  State: District: President Senate President State: District: Pre	Mailing Address PO Box 3176						
Long Branch Purpose of Disbursement  Candidate Name Rep. Frank Pallone Jr.  Office Sought:				Transaction II	D . 20747477		
Candidate Name  Rep. Frank Pallone Jr.  Office Sought:	g	NJ 07740		Transaction	D . 30/1/4//		
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